

Indian Institute of Management Raipur

TRAVEL REQUEST FORM

Name (in Block Letters): _____

Designation: _____ Basic Pay: _____

To
Director
IIM Raipur

Sanction is required to perform journey as below:

A. <i>Travel Schedule</i>						Head of Account _____		
<u>DEPARTURE</u>			<u>ARRIVAL</u>			Mode of Journey*	Purpose	FARE (Rs.)
Station	Date	Time	Station	Date	Time			
a	b	c	d	e	f	g	h	i
							Total	

*Road (Taxi, Bus) Air, Rail

B _Advance

- | | | |
|-------|----------------------------------|---------|
| (a) | For railway fare (if applicable) | Rs..... |
| (b) | Daily allowance | Rs..... |
| (c) | Local conveyance | Rs..... |
| (d) | Any other | Rs..... |
| Total | | Rs..... |

Recommended by.....

Signature

(Where required)

Approval

Date

Director/Approving Authority

Received Rs.....by Cheque/Cash.

Date:

Signature

*Prepare in duplicate Retain copy which should be used as claim form on completing journey.